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APPLICANTS.

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** CONTINUING DATA ***** *CD* ***** none** FOREIGN APPLICATIONS ***** *CD* ***** none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

12/23/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 6	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>CD</i> Initials			

ADDRESS

45992

TITLE

Fused booth encoder multiplexer

FILING FEE RECEIVED 870	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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